## MICHIGAN OSTEOPATHIC ASSOCIATION



Testimony on HB 4134 and 4135

Mr. Chairman,

Thank you for the opportunity to provide testimony in support of HB 4134 and 4135. As the Immediate Past President and current board member of the Michigan Osteopathic Association, I represent the osteopathic physicians in the state of Michigan. I am also speaking on behalf of the American Osteopathic College of Radiology. I am an interventional radiologist and Associate Professor of Interventional Radiology at Michigan State University. Formerly, I served as program director of the radiology residency at Huron Valley and director of medical education, osteopathic division, Detroit Medical Center.

For some background into my training, after graduating medical school, I completed a 1-year traditional internship. I then went through a 4-year residency program in diagnostic radiology. Finally, I pursued and completed a 1-year fellowship in interventional radiology. I achieved board certification in diagnostic radiology after completing my residency. In addition, I earned an additional certification in interventional radiology after my fellowship.

I support all the statements that Dr. Canfield made today.

The decision making process regarding these bills needs to remain focused on re-certification. There are no longitudinal, peer reviewed research studies on Maintenance of Certification (MOC) that I am aware of.

The rules of MOC are constantly in a state of flux. Changes are continuously being made. This makes it extremely difficult for physicians to know what rules to follow.

The financial and time burdens have already been discussed.

There are no set criteria for physicians in my position who also have a significant role in medical education. Michigan has a large number of medical schools in the state. This affords us the unique opportunity to interact with medical students, residents and fellows in training. By having quality education training programs, we can use these to better train physicians to change their behavior for the best practices. This will help ensure quality care for the people of our state.

In addition, fee for service payment models are transitioning to fee for value. Accountable care organizations (ACO's) and physician organizations (PO's) require accountability for quality of care. Multiple metrics must be adhered to. The physicians that do not meet these standards are relegated to a lower tier. That means patients must pay more to see them. It is to everyone's benefit that the ACO's and PO's provide meaningful education on best practices.

I urge your committee to support the passage of the bills.

Thank you,

Bruce A. Wolf, DO, FAOCR

Immediate Past President, Michigan Osteopathic Association

President, American Osteopathic College of Radiology